depend upon a complex sensibility, in which all the tissues of the limb concur. 13. Walking, in the physiological condition, is subordinate, like respiration, to two influences; the one, which commands—periodical; the other, which executes and co-ordinates. The former is the will, the latter is the reflex power of the spinal cord. Locomotive ataxia is produced whenever the reflex power is altered or diminished. 14. Locomotive ataxia, properly speaking, is marked by a truly characteristic physiognomy only in the lower limbs. Its effects in the upper limbs approach those which determine in them trembling, incomplete paralysis, and cutaneous anæsthesia. The reason is, that the reflex or co-ordinating power, of which locomotive ataxia is the functional disturbance, is physiologically less developed in the brachial than in the lumbar portion of the spinal marrow."

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19. *Infantile Paralysis.*—Dr. W. Adams mentioned (March 16), at a meeting of the Harveian Society of London, that he had frequently had to treat cases of this affection, and that in some instances he had been able to restore the power of locomotion where it had been supposed to have been irretrievably lost. Infantile paralysis came on frequently during teething, at the age of one or two years. Both legs or both arms are paralyzed suddenly or in the course of a few hours, or only one limb may be affected. Sir B. Brodie used to say that unless this paralysis is naturally recovered from in six months, it is hopeless. In three to six months there is usually the greatest amount of recovery, the rectus muscle of the thigh often being the last to recover. As to the pathology of the disease, Mr. Adams confessed that he knew nothing of it. The most recent German writers on the subject attribute it entirely to the muscles; and Rilliet and Barthez recorded only two *post-mortem* examinations. In these, as well as in the one made by Mr. Adams, no appearance could be made out to account for the disease, and children do not die of it. Consequently the cause of it is not investigated. If practitioners were but aware of this fact, they would probably make the necessary examinations. It must be remarked that natural recovery of the muscular powers may progress from six months up to three or four years, during which time a series of events takes place—namely, contraction of all the joints. Mr. Wilkinson had lately brought him a child with great contraction of the knee-joints. The muscles around the hip-joints are usually the first to recover. A child was sent him from Clifton, of the age of from six to seven, which had never stood. It had contraction of the joints, arms, legs, and trunk, and Mr. Adams was able to promise the parents of the child that it should walk in three months. Dr. Brown-Séquard had requested Mr. Adams to see a young lady, aged seven years, in consequence of paralysis of both legs, and in three months this child was able to walk with steel supports. If a child could use the psoas and iliacus muscles, it could be made to walk, and this was the practical test. It should be laid down upon the floor, and if it can draw up its knees, success is certain. With regard to treatment in the early stages, he had known counter-irritation down the spine used, but the chances were that no treatment would do much good. When the child has paralysis with flaccid muscles, rubbing and warm clothing are of use. Galvanism of both legs under water is also useful, notwithstanding that many physicians and surgeons disparaged this remedy, and said it had been tried and found to be valueless. He (Mr. Adams) used two tin boots, filled with warm water, in each of which the little patient's foot is placed, and galvanism is applied. Dr. Gull had written some valuable papers on galvanism in the *Guy's Hospital Reports*. The nutrition of the limb must, if possible, be maintained. Dr. Junod's boot for exhausting the air was once in much repute, and is now, perhaps, too much neglected. A paralytic patient of his could always warm the leg in ten minutes by this apparatus; the boot has had no bad effects, but is liable to get out of order. It is, doubtless, a most useful remedy in many cases of paralysis. In some cases of infantile paralysis the rectus muscle remains paralyzed for life, and the leg swings; but this can be compensated for by mechanical means, so as to enable the child to walk.—*Med. Times and Gaz.*, May 20, 1865.

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20. *Therapeutic and Physiological Action of Chloroform in Epilepsy.*—Dr. Wm. Murray, of Newcastle-on-Tyne, in a recent paper (*Med. Times and Gaz.*,

April 8, 1865), observes Dr. Russell Reynolds has detailed in his classical work on epilepsy the effects produced on that disease by the inhalation of chloroform till the patient is fully under its influence. He uses the chloroform thus when an attack is threatening, and at certain intervals afterwards, and concludes that when administered in this way "it may delay the attacks for a time, but it exerts no permanently good influence." The plan of treatment I have adopted (the results of which are about to be detailed) differs from the above in some important particulars, although the principle on which it is administered seems to be the same.

1st. The chloroform is inhaled in quantities so small as to stop short of inducing unconsciousness, except of the most trifling nature.

2d. It is administered two or three times daily for a period of two or three months at least.

3d. It is given regardless of the fits, never being given to ward them off, and never omitted because of their occurrence.

The principle on which it is administered is that of paralyzing the upper ganglia of the sympathetic, to induce conditions (hyperæmia) tending to unconsciousness, the very opposite of those which occur at the onset of an epileptic attack. Thus the primary influence of the drug as a stimulant to the brain, by inducing hyperæmia thereof, is brought to bear upon that organ thrice daily for a long period of time, and it is believed that there are cases of epilepsy in which this treatment must and does prove beneficial.

I should have used the NITRATE OF AMYLE instead of chloroform in some of these cases had the agent been less dangerous; for it seems to be the most powerful means we possess of exciting the heart's action, and producing results similar to those which follow paralysis of the sympathetic in the neck. When a few drops of the nitrate of amyle are inhaled, the heart's action increases by forty beats per minute, and the head, face, and neck become suffused by an intense hyperæmia; at the same time cerebral symptoms, such as throbbing and a sense of fulness of the head, indicate corresponding hyperæmia in the cranial cavity and its contents.

Dr. Murray reports several cases of epilepsy in which he has employed chloroform, and adds, from all this it appears that in accordance with the view taken of the physiological action of chloroform administered in this way, its therapeutic properties are to be relied on in cases of epilepsy where there is manifest loss of brain power. In such cases it seems to lead to increased vascularity of the head and consequent stimulation of the brain, accompanied by that excitement of the system which occurs in the very first stage of chloroformosis. It seems to do positive harm in cases where the brain is active and excitable, and in cases where the mental faculties are of average power and unimpaired no appreciable effect is produced on the disease.

In none of the cases in which the remedy was tried for a lengthened period has its use been followed by injury to the mental faculties.

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21. *Treatment of Diphtheria with Ice.*—Mr. J. DUGGAN states that he has successfully employed ice in the case of a man affected with diphtheria. He ordered the patient to keep constantly swallowing small particles of ice, and also to keep continually sucking and melting icicles in his mouth until he should see him again on the following day, advising him to carry out his intentions most assiduously. On visiting him the evening of the next day "I was agreeably surprised," he says, "to find him much improved, the tensive swelling of the throat to a great extent subsided, and the inflammation of the internal fauces and the tumefaction of the velum pendulum palati (to which was attached the peculiar adventitious membrane) greatly reduced. I impressed upon him to continue using the ice as usual. As he complained of being weak, I gave him a mixture of infusion of bark and tincture of snakeroot, to take two tablespoonfuls three times a day, and to have an abundance of fresh milk and beaten eggs for food. He pursued this course of treatment for a few days, and, to my gratification, ultimately recovered from this dangerous disease.

"Although this is essentially a blood disease, yet the application of cold to the internal parts of the throat will be found of much benefit and a source of great